



500.014829

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

NAOJI OTSUKA ET AL.

Application No.: 09/675,165

Filed: September 29, 2000

For: TWO-WAY PRINT APPARATUS
AND PRINT METHOD

Examiner: Thinh H. Nguyen

Group Art Unit: 2861

March 17, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450AMENDMENT

Sir:

A. Introduction

I. Applicants petition to extend the time for response to the Office Action dated November 17, 2004, for one month from February 17, 2005, to March 17, 2005. A check in the amount of \$120.00 for payment of the extension fee is enclosed. Please charge any additional fee required for the extension, and credit any overpayment, to Deposit Account 06-1205.

03/22/2005 FHETEK11 00000051 09675165

01 FC:1251 120.00 DP

03/22/2005 FHETEK11 00000052 09675165

01 FC:1201 200.00 DP
02 FC:1202 50.00 DP

I hereby certify that this correspondence is being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 17, 2005

(Date of Deposit)

Elizabeth F. Holowacz

(Name of Attorney for Applicant)

Signature

March 17, 2005

Date of Signature

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50.00 DA

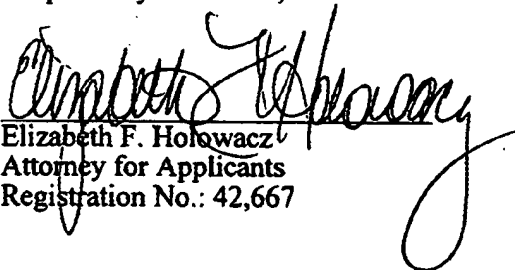
03/31/2005 DBKDMN

01 FC:1202

Fee only

- ☐ Verified Statement claiming small entity status is enclosed, if not filed previously.
- ☒ A check in the amount of \$ 250.00 is enclosed.
- ☐ Charge \$ _____ to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.
- ☒ Any prior general authorization to charge an issue fee under 37 C.F.R. 1.18 to Deposit Account No. 06-1205 is hereby revoked. The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. 1.16 and 1.17 which may be required during the entire pendency of this application, or to credit any overpayment, to Deposit Account No. 06-1205. A duplicate copy of this paper is enclosed.
- ☒ A check in the amount of \$ 120.00 to cover the fee for a one month extension is enclosed.
- ☐ A check in the amount of \$ _____ to cover the Information Disclosure Statement fee is enclosed.
- ☒ Applicants' undersigned attorney may be reached in our New York office by telephone at (212) 218-2100. All correspondence should continue to be directed to our address given below.

Respectfully submitted,


Elizabeth F. Holowacz
Attorney for Applicants
Registration No.: 42,667

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